

## **Application Data Sheet**

### **Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	N/A
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	METHOD FOR PAYING INVOICES
Attorney Docket Number::	30728/39687
Request for Early Publication?::	No
Request for Non-Publication?::	No
Total Drawing Sheets::	2
Small Entity?::	Yes
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

### **Applicant Information**

Applicant Authority Type::	Inventor
Status::	Full Capacity
Given Name::	William
Middle Name::	J.
Family Name::	Dupré
City of Residence::	Downers Grove
State or Province of Residence::	IL
Country of Residence::	US
Street of mailing address::	929 Weatherbee Avenue
City of mailing address::	Downers Grove
State or Province of mailing address::	IL
Postal or Zip Code of mailing address::	60516

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: John  
Middle Name:: G.  
Family Name:: McGill  
City of Residence:: Naperville  
State or Province of Residence:: IL  
Country of Residence:: US  
Street of mailing address:: 2324 Flat Rock Court  
City of mailing address:: Naperville  
State or Province of mailing address:: IL  
Postal or Zip Code of mailing address:: 60564

#### **Correspondence Information**

Correspondence Customer Number:: 04743

#### **Representative Information**

Representative Customer Number:: 04743

#### **Assignee Information**

Assignee name:: TRILOGY PAYMENT SERVICES, INC.  
Street of mailing address:: 6170 West Lake Mead Blvd., Suite 70  
City of mailing address:: Las Vegas  
State or Province of mailing address:: NV  
Postal or Zip Code of mailing address:: 89108-2661